



Grant Evaluation/Follow-up Form  
(funded for School Year 2025 – 2026)

Please complete all information and return this form to Kathy Bickerstaff, Executive Director, Sherman Education Foundation. Please email the document (and digital photos) to Kathy **AND** send the signed original through school mail. **(Due by May 22, 2026)**

**Name of Campus Project:**

**Campus Name:**

**Person(s) responsible for grant:**

**Campus Principal:**

**Amount of Grant Received:**

**Date funded: June-August 2025**

**Number of Students/Parents Impacted:**

*(include all students/parents that participated or shared in this project)*

**Duration of Project:**

*(one-time use or how many years expected to use)*

**Project Evaluation:**

1. Specifically, what **measurable goals** did you/your students attain as a result of this grant?
2. Report the project's **success** in reaching those goals, including data indicating that you met these goals. Additional sheets may be attached if necessary.
3. Provide a short narrative of the **implementation** of this project, including other agencies or organizations that may have been involved. (Use extra sheets if needed.)

